

Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

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|--|---------------------------|---|----------------------------------|--------------|
| AGENCY NAME Mississippi Community College Board | | CONTACT PERSON Dr. Shawn Mackey | TELEPHONE NUMBER 601-432-6519 | |
| ADDRESS 3825 Ridgewood Road | | CITY Jackson | STATE MS | ZIP 39211 |
| EMAIL smackey@mscjc.edu | SUBMIT DATE 10/23/2012 | Name or number of rule(s): PUBLIC NOTICE: Revised Surgical Technology Curriculum Framework (2012) | | |

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: PUBLIC NOTICE: The "Surgical Technology Curriculum Framework (2012 revision) is a revision of the "2010 Surgical Technology Curriculum Framework. The executive summary of changes "Public Notice: Revised Surgical Technology Curriculum Framework (2012) Summary of Changes" may be accessed online at the following link: <http://www.mccb.edu/pdfs/ct/PublicNoticeSurgicalTechCurrFramework2012.pdf> The Surgical Technology Curriculum Framework (2012) may be accessed online at the following link: <http://www.mccb.edu/pdfs/ct/PSSurgicalTechFramework2012.pdf>

Specific legal authority authorizing the promulgation of rule: Mississippi Code Title 37, Chapter 153List all rules repealed, amended, or suspended by the proposed rule: Surgical Technology Curriculum Framework (2010).

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

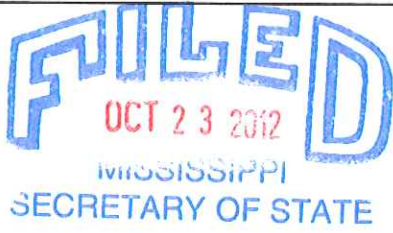

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

| TEMPORARY RULES | PROPOSED ACTION ON RULES | FINAL ACTION ON RULES |
|--|---|---|
| _____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing _____ Other (specify): _____ | Action proposed: _____ New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: <input checked="" type="checkbox"/> 30 days after filing _____ Other (specify): _____ | Date Proposed Rule Filed: _____ Action taken: _____ Adopted with no changes in text _____ Adopted with changes _____ Adopted by reference _____ Withdrawn _____ Repeal adopted as proposed Effective date: _____ 30 days after filing _____ Other (specify): _____ |

Printed name and Title of person authorized to file rules: Shawn Mackey, Associate Executive Director

Signature of person authorized to file rules: _____

| OFFICIAL FILING STAMP | DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP | OFFICIAL FILING STAMP |
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| <div style="border: 1px solid black; height: 100px; width: 100%;"></div> Accepted for filing by _____ | <div style="border: 1px solid black; padding: 10px; text-align: center;">  </div> Accepted for filing by  | <div style="border: 1px solid black; height: 100px; width: 100%;"></div> Accepted for filing by _____ |

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.